<i>)</i> .	. ``		اول أم	WIIW	DIE	Copy	9_	().	_ ,	P201	788
PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2000 CLAIMS AS FILED - PART 1												nber
<u> </u> _		SHALL I		ÓŘ		THAN ENTITY						
TOTAL CLAIMS			34					RATE	FEE	Ì	RATE	FÉE
FOR			MANGER FILED N			ABER EXTRA		BASIC FEE 355.00		OR	DASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			34m	uns 50=	• /	4		X\$ 9=	126	OR	X\$18÷	
IM	EPENDENT C	LAIMS	7 minus 3=			4		X40=	160	OR	Xêo-	
I.E.	LTIPLE DEPE	NOENT CLAM P	RESENT					+135=	100	OR	+270=	
* If the difference in column 1 is less than zero, enter "o" in column 2								TOTAL	271	OR	TOTAL	
CLAIMS AS AMENDED - PART II TOTAL 64 TOTAL OTHER THAN												
		(Column 1)		SMALL	ENTITY	OR	SMALL					
EMTA		CLAIMS REMAINING AFTER AMENOMENT		PREVIO	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
9	Total	.34	Minus	-30	7_	•=		X\$ 9=		OR	X\$18=	
AME	Independent	- 7	Minus	7				X40=		OR	X80=	
FRAST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+135=	ŀ	OR	+270=	
								TOTAL			TOTAL	
	41821	A	DOIT. FEE		Jon.	ADDIT. FEE						
ENT B	*****	(Column 1) CLAIMS REMAINING AFTER AMENDMENT	े घर है • • • • • •	HIGH HIGH NUME PREVIO PAID	EST SER JUSLY	(Column 3) PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDMENT	Total	.32	Minus	-3	4		ľ	X\$ 9=		ОЯ	X\$18=	
AME	Independent	· 7	Minus	en /	CT 6134	*		X40=		ОЯ	X80=	
PIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+135= ,		OR	+270=	
								TOTAL DOTT. FEE		OR	YOTAL NOOIT, FEE	
	/ /	(Column 1)		(Colum		(Column 3)						
AMENDMENT C		CLAIMS REMAINING AFTER AMENOMENT		HIGHE NUMB PREVIOU PALO F	ÉR USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
3	Total	. 22	Minus	• 3	4	- /		X3 9-		OR	X\$18=	
	Independent	· 2	Minus	***	2	-/	F	X40=		OR	XBE=	
	FIRST PRESE	RST PRESENTATION OF MULTIPLE DEPENDENT CLAIM /						-135=		1	+270=	
• #	* If the entry in column 1 is less than the entry in column 2, write "O" in column 3.									OR I	/+2/0= YOTAL	
	the Teghest Nur. The Tilstent No.	ab <i>t</i> Previously Pal ober Previously Pal	d For IN THIS id For IN THE	SPACES	less then less then	20, 90ter "20."		TOYAL DIT. FEE	لببا	-	DOIT FEE	
"If the "Highest Number Previously Peid For" (Total or Independent) is the highest number found in the appropriate box in column 1. The "Highest Number Previously Peid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												

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